## **HDHP 101**

State Employer Training
It's Your Choice High Deductible Health Plan
(Recorded Webinar)



## Overview

High Deductible Health Plan (HDHP) Health Savings
Account
(HSA)

Limited Purpose Flexible Spending Account (LPFSA)

Eligibility

Resources

**State Only** 

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High Deductible Health Plan (HDHP)

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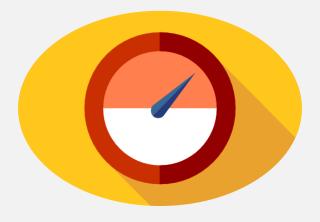
**HDHP 101** 



## What is an HDHP?



Lower annual premium



Higher annual deductible



Paired with the state-sponsored HSA



## What is an HSA?



Individually-owned, tax-advantaged account



Pays for current and future medical expenses



Paired with an IYC HDHP



# Who is Eligible for HDHP & HSA?

 Those currently eligible for the State of Wisconsin Group Health Insurance Program

State employees

Limited-Term Employees (LTEs) Annuitants under 65 years of age

Dependents also eligible



## Who is Not Eligible?

Short-term academic staff not in the WRS

Graduate assistants

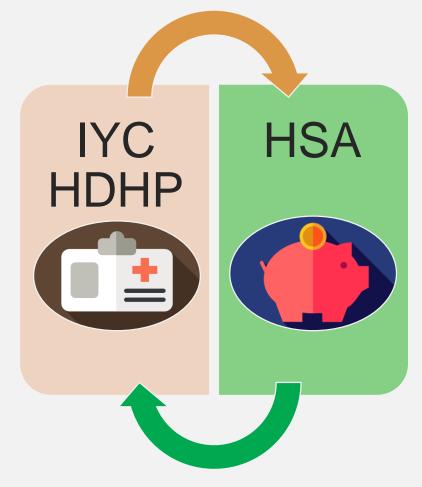
Annuitants older than 65

Subscribers with disqualifying other coverage



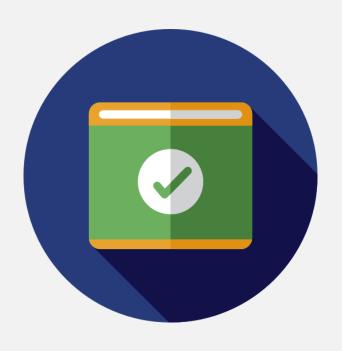
# Dual Enrollment Requirement

- State members electing an It's Your Choice (IYC) HDHP must also enroll in the state-sponsored HSA
- Intended to help members successfully plan for health care expenses



# Coverage Requirements

- The **subscribing** member:
  - Must be covered by an IYC HDHP and enrolled in the statesponsored HSA
  - Cannot have any other disqualifying coverage
  - **Must** notify their human resources/benefits office if they become enrolled in any other disqualifying coverage



## Permitted Other Coverage

#### Certain types of other insurance are permitted

- Accident/liability
- Dental care
- Vision care
- Long-term care
- Disability
- Workers compensation
- Hospitalization

- Specific disease or illness insurance, if it pays a specific dollar amount when policy is triggered
- Wellness and employee assistance programs (EAP) that do not pay significant benefits

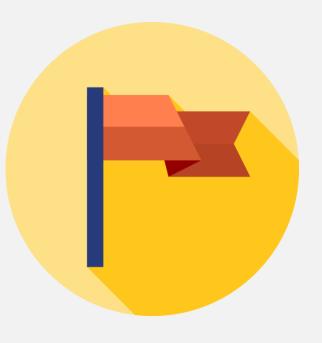




# Disqualifying Coverage

#### The **subscribing** member cannot:

- Be enrolled in Medicare (any part, including Part A or Part B)
- Be covered by TRICARE
- Have accessed Veterans Administration (VA) benefits in the past 90 days (except for benefits related to service connected disability)
- Be claimed as a dependent on another person's tax return (except spouse)
- Have a Health Care FSA (also applies to spouse)



# Disqualifying Coverage

- If the subscribing member is determined to be ineligible:
  - Coverage will be changed to the non-HDHP plan design with the same insurance carrier
  - Premiums and claims will be retroactively adjusted

Enrolled during IYC Open Enrollment, but never eligible Retroactive to January 1 of current plan year

Enrolled mid-year, but never eligible

Retroactive to HDHP effective date of current plan year

Enrolled during IYC
Open Enrollment or
mid-year, but became
ineligible <u>after</u> the
coverage effective
date

Retroactive to member's date of ineligibility



# Disqualifying Coverage

 If the subscribing member is determined to be ineligible for an IYC HDHP, it will also have a significant impact on their HSA

HSA custodian returns all contributions

Member can be requested to repay employer contribution spent

Unpaid fund amount included as gross income and wages on W-2

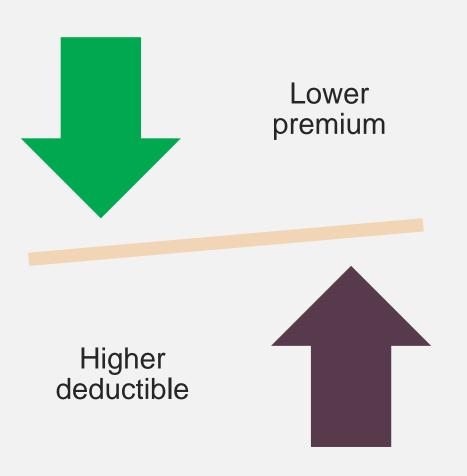




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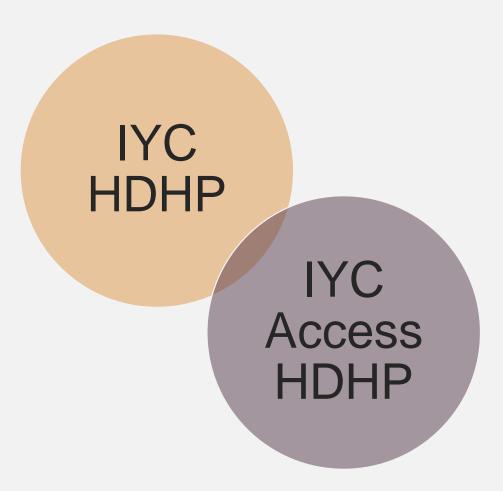


### **How Does an HDHP Work?**



- It's Your Choice (IYC) HDHP offerings are HSA qualified
- IYC HDHPs must be paired with the state-sponsored HSA
- HSAs allow members to pay for expenses with pre-tax funds
- Members trade lower premiums for higher costs at time of service

# IYC HDHP Plan Designs



- IYC HDHP and IYC Access HDHP have similar cost breakdowns, including:
  - Annual medical deductible
  - Out-of-Pocket Limit (OOPL)
  - Copay amounts
  - Post-deductible coinsurance amounts
- IYC Access HDHP benefits utilized out-of-network have different limits
- Visit It's Your Choice 2018 at etf.wi.gov/IYC2018 for a complete breakdown of costs by plan design

# Monthly Premium Comparison

#### 2018 Employee Monthly Contribution Rates

Medical with Dental

IYC HEALTH PLAN	IYC HDHP
\$88 individual \$219 family	\$33 individual \$82 family
IYC ACCESS PLAN	IYC ACCESS HDHP

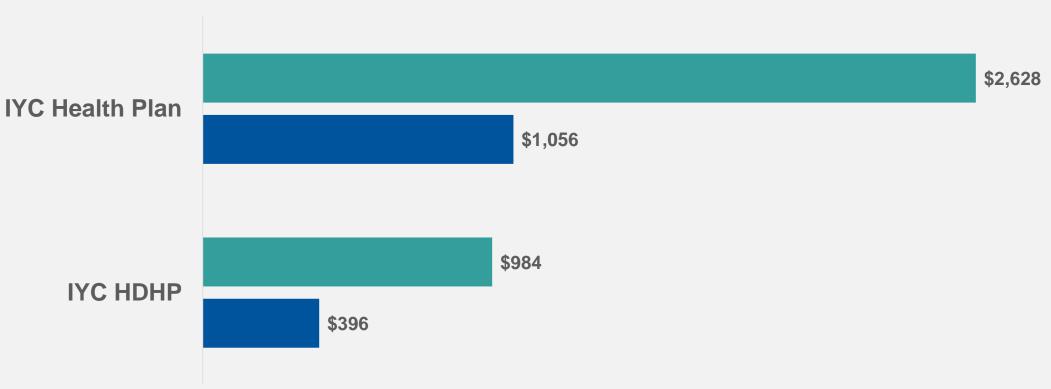
Visit It's Your Choice 2018 at etf.wi.gov/IYC2018 for a complete list of monthly contribution rates



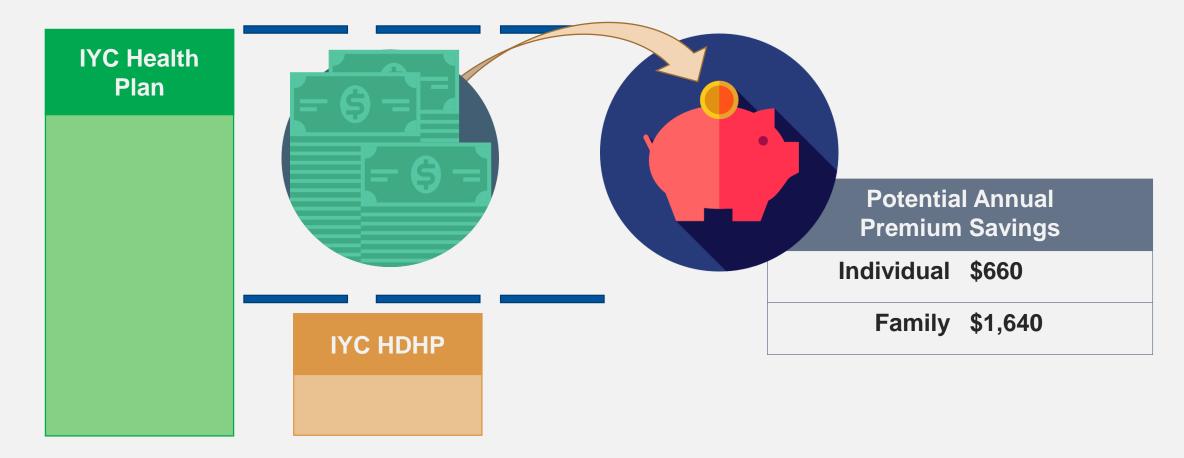
## **Annual Premium**

#### **2018 Annual Premium Comparison**

■ Family with Dental ■ Individual with Dental



# Premium Savings Example



## **How Does the HDHP Work?**

Annual Deductible

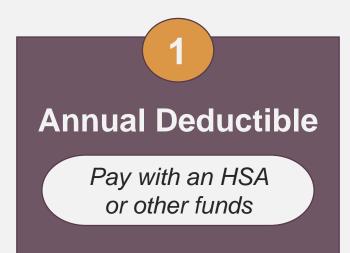
2

Copay /
Coinsurance

3

Out-of-Pocket Limit (OOPL)

### **How the HDHP Works**



- Deductible The amount members pay before the plan will pay for covered services
  - Members pay all costs until the annual deductible is met
  - Includes prescription drug costs
  - Applies to the OOPL
  - Pay with an HSA or other funds
  - Exception: Routine preventive care is covered 100% when using an in-network medical provider

# **Annual Deductible Comparison**

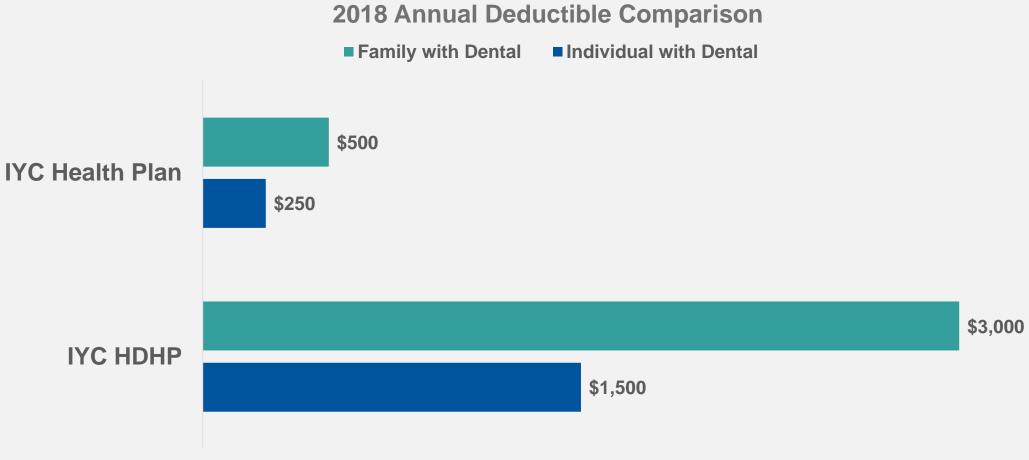
### 2018 Active State Employees and Retirees under Age 65

IYC HEALTH PLAN	IYC HDHP
\$250 individual \$500 family	\$1,500 individual \$3,000 family
IYC ACCESS PLAN	IYC ACCESS HDHP

Visit It's Your Choice 2018 at etf.wi.gov/IYC2018 for a complete list of monthly contribution rates



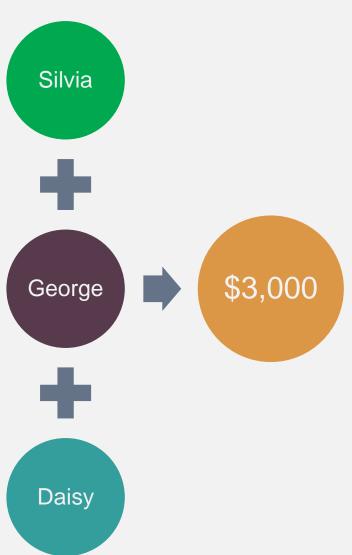
### **Annual Deductible**



# **Family Deductible**

The full family deductible **must** be met before coverage begins

- The \$3,000 family deductible applies to <u>all</u> covered members
- There is no embedded individual deductible amount



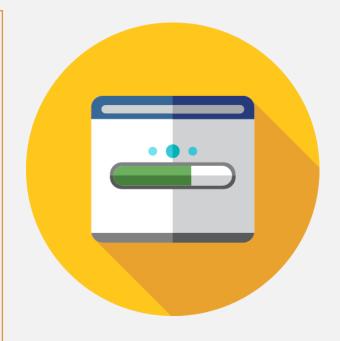


## **Annual Deductible**

Below is partial list of expenses that count toward the annual IYC HDHP deductible

- Chiropractic office visits
- Emergency room visits
- Gynecological / obstetrician office visits
- Internist office visits
- Lab work
- Physical / occupational / speech therapy office visits

- Prescription drugs
- Primary care office visits
- Specialty office visits
- Transplants
- Urgent care visits
- Vision exams in an office visit setting
- X-rays

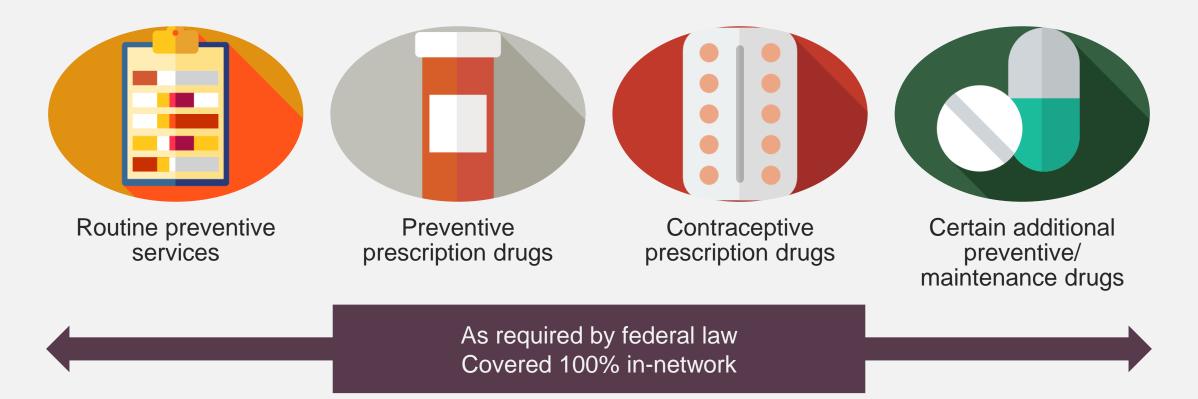


Visit It's Your Choice 2018 at etf.wi.gov/IYC2018 for a complete breakdown of costs by plan



## **Covered Pre-Deductible Costs**

The plan will **not** pay medical or prescription costs until the deductible is met, except for:



## **Routine Preventive Services**

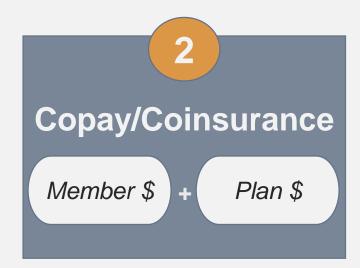
Below is **partial** list of preventive services that are covered before the deductible is met

#### Adults Women Blood pressure screenings Anemia screenings Breast cancer mammography Cholesterol screenings screenings Depression screenings Contraception Diet counseling Cervical cancer screenings HIV screenings Osteoporosis screenings Urinary tract infection screenings Immunization vaccinations Well-woman visits Tobacco use screenings

• Visit **HealthCare.gov** for a complete list of federally required preventive services



### **How the HDHP Works**



- Copay Members pay a fixed dollar amount for certain health care services
- Coinsurance Members pay a fixed percentage of costs (typically 10%) for certain health care services post-deductible
  - Plan pays remaining percentage / dollar amount
  - Amount and type of member share varies by type of service
  - Pay using an HSA or other funds



### **How the HDHP Works**

Out-of-Pocket Limit

Plan pays
100%

- Out-of-Pocket Limit (OOPL) The most members will pay for covered services
  - Deductible and coinsurance payments accumulate towards the OOPL
  - Plan will pay 100% of covered services for the rest of the plan year
  - OOPL protects members in the event of a major medical event

## **Annual Out-of-Pocket Limit**

### 2018 Active State Employees and Retirees under Age 65

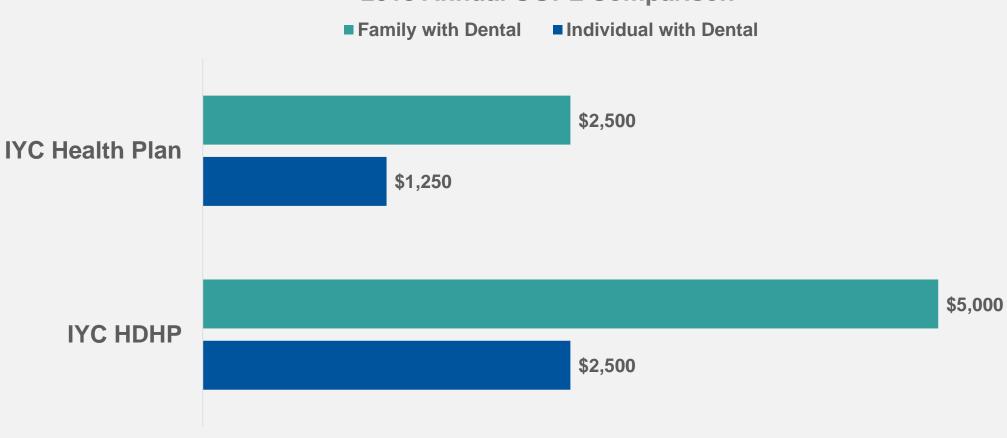
IYC HEALTH PLAN	IYC HDHP
\$1,250 individual	\$2,500 individual
\$2,500 family	\$5,000 family
IYC ACCESS PLAN	IYC ACCESS HDHP
\$1,250 individual	\$2,500 individual
\$2,500 family	\$5,000 family

Visit It's Your Choice 2018 at etf.wi.gov/IYC2018 for a complete breakdown of costs by plan



## **Annual Out-of-Pocket Limit**

#### **2018 Annual OOPL Comparison**



## **Primary Care Office Visit**

Pre-Deductible

Member pays 100%

Post-Deductible

\$15 copay per visit innetwork, up to OOPL

- Additional services such as lab work, X-rays, etc., count toward the deductible and are subject to coinsurance
- Includes internist, chiropractor, pediatrician, and gynecologist visits
- Visit It's Your Choice 2018 at etf.wi.gov/IYC2018 for a complete list of providers considered to be primary care

## **Specialty Office Visit**

Pre-Deductible

Member pays 100%

Post-Deductible

\$25 copay per visit innetwork, up to OOPL

- Additional services such as lab work, X-rays, etc., count toward the deductible and are subject to coinsurance
- Includes specialty providers, urgent care, and adult vision exams in an office visit setting

## **Emergency Room Visits**

Pre-Deductible

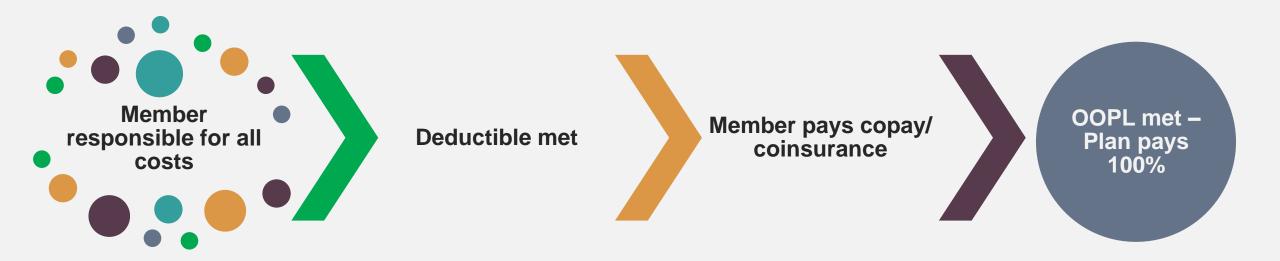
Member pays 100%

Post-Deductible

\$75 copay per visit, up to OOPL

- Copay waived if admitted as inpatient directly from ER or for observation for 24+ hours
- Coinsurance may apply to other services beyond copay, up to OOPL

# **HDHP Recap**



#### **HDHP** Recap



Lower annual premium



Higher annual deductible



Increased member responsibility



Paired with the HSA



**HDHP 101** 



#### **HSA** Benefits

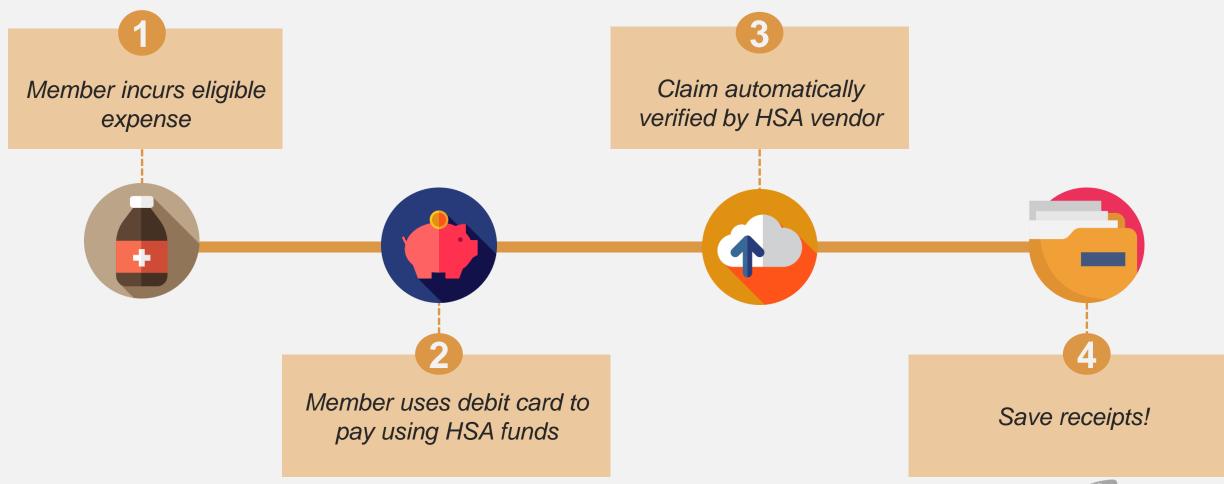


# Paying with the HSA

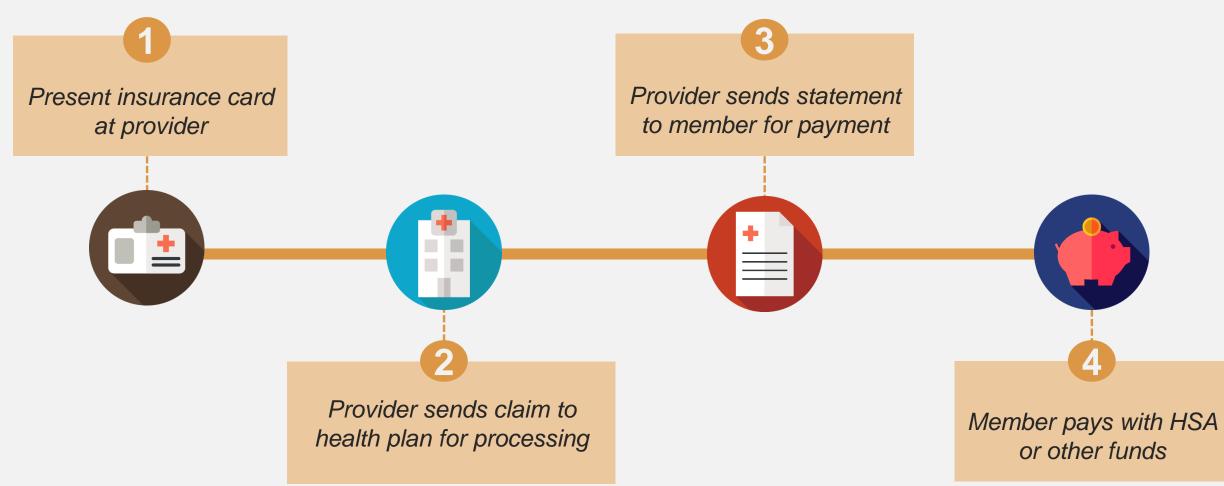
- Members can pay for eligible health care expenses with their HSA debit card or pay out of pocket
- Only pays for expenses incurred after HSA established
- Expenses can be incurred by member and eligible dependents



## **Debit Card Payment Process**



# **Claims Payment Process**



#### What is an LPFSA?



Pre-tax benefit used to pay for eligible dental and vision expenses



Pays for eligible postdeductible medical expenses



Paired with an IYC HDHP



Paired with statesponsored HSA

## **Additional Training**





Webinar Modules Available





**HDHP 101** 



#### **Customer Service**

 Members frequently have questions about their HDHP coverage, HSA and/or LPFSA accounts



For HDHP questions, members should contact...

For HSA and LPFSA questions, members should contact...

- Their human resources/benefit office
- Their health plan
- ETF Member Services

- TASC Customer Care
  - Phone 844-786-3947 or 608-316-2408
  - Email 1customercare@tasconline.com



## **Employer Assistance**

 If a high-level question or issue arises, employers also have resources available to them



For HDHP questions, employers should contact...

For HSA and LPFSA questions, employers should contact...

- The health plan offering the HDHP coverage
- ETF Employer Services

- TASC Account Managers
  - Email stateofwi@tasconline.com



#### Resources

	IYC 2018 / ETF Website	TASC Landing Page
Annual It's Your Choice Open Enrollment information	✓	×
HDHP premium rates	✓	×
HSA contributions limits	✓	✓
Eligible expense information	✓	✓
Medical and pharmacy comparison charts	✓	×
TASC Online Account login portal	×	✓
HSA / ERA enrollment & welcome brochures	✓	✓
HSA / ERA participant guides	×	✓
HSA / ERA forms and worksheets	×	✓

# **Training Modules**

HDHPHSALPFSA• Retirem

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Retirement

Disqualifying Other Coverage



# Thank you











608-266-3285